24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Senate Leadership Fund			
	C C00571703		
Check if 24-hour report			
Full Name of Payee	Date of Public Distribution/Dissemination		
Mentzer Media Services	10 04 2016		
Mailing Address 600 Fairmount Ave	Amount		
	1171550.00		
City State Zip Code Towson MD 21286	1471558.88 Transaction ID : SE1		
	Date of Disbursement or Obligation		
Purpose of Expenditure TV/Media Placement / Radio Placement Category/ Type	09 30 / 2016		
Name of Federal Candidate Support Office	e Sought: House District:		
Kander, Jason, , ,	President Senate State: MO		
Calendar Year-To-Date Per Election for Office Sought Disbut 2016			
	Other (specify) -		
Full Name of Payee Arena Online	Date of Public Distribution/Dissemination		
Mailing Address 1780 Sequoia Vista Circle	10 04 2016		
- 1700 coquala vista circie	Amount		
City State Zip Code	231666.00		
Salt Lake City UT 84104	Transaction ID : SE2 Date of Disbursement or Obligation		
Purpose of Expenditure Online Advertising Category/	M M / D D / Y Y Y Y		
Online Advertising Type	10 04 2016		
Name of Federal Candidate Support Office	e Sought: House District:		
Kander, Jason, , ,	President Senate State: MO		
	ursement For: Primary X General		
Per Election for Office Sought 4131702.56 2016	Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	1703224.88		
	7 7 7		
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •		
24.0	0 05 2016		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 2 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	F	FEC IDENTIFICATION NUMBER ▼	
Senate Leadership Fund		C C00571703	
Check if 24-hour report X 48-hour report N New report	Amends report filed on	M / D = D / Y = Y = Y	
Full Name of Payee	Date of	Public Distribution/Dissemination	
Wilson Grand Communications		0	
Mailing Address 429 N. St. Asaph Street	Amount	t	
City State Zip Co	ode	12879.00	
Alexandria VA 22314		ction ID : SE3 Disbursement or Obligation	
Purpose of Expenditure TV/Media Production Cate	gory/ Type	10	
Name of Federal Candidate	Support Office Sought:	House District:	
Kander, Jason, , ,	X Oppose Presider		
Calendar Year-To-Date Per Election for Office Sought 41317	Disbursement 2016 Oth	For: Primary X General ner (specify) ▶	
Full Name of Payee	Date of	Public Distribution/Dissemination	
Wilson Grand Communications		10 04 2016	
Mailing Address 429 N. St. Asaph Street	Amoun	t	
City State Zip Co	ode	3270.00	
Alexandria VA 2231		tion ID : SE4 f Disbursement or Obligation	
Purpose of Expenditure Radio Production Cate	gory/ Type	04 / 2016	
Name of Federal Candidate	Support Office Sought:	House District:	
Kander, Jason, , ,	Coppose Presider	nt Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought 41317	02.56 Disbursement 2016 Oth	For: Primary General Mer (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		16149.00	
		7	
(b) SUBTOTAL of Unitemized Independent Expenditures		4	
(c) TOTAL Independent Expenditures	·······	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Crosby, Caleb, , , [Electronically F	iled] Date 10	05 / 2016	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Senate Leadership Fund	C C00571703		
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee Date	e of Public Distribution/Dissemination		
Richard Sales Media	10 04 2016		
	ount		
Suite 408			
City State Zip Code	2000.00		
Date	nsaction ID : SE5 e of Disbursement or Obligation		
Purpose of Expenditure Web Ad Category/ Type	10 04 / 2016		
Name of Federal Candidate Support Office Sou	ight: House District:		
Kander Jason	sident Senate State: MO		
Calendar Year-To-Date Per Election for Office Sought Disbursem 2016	nent For: Primary		
Full Name of Payee Dat	te of Public Distribution/Dissemination		
	M M / D D / Y Y Y Y		
Mailing Address	ount		
	Out		
City State Zip Code	<u> </u>		
	te of Disbursement or Obligation		
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office Sou	ught: House District:		
Oppose Pres	sident Senate State:		
Calendar Year-To-Date Disbursem	nent For: Primary General		
Per Election for Office Sought	Other (specify) -		
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	1721373.88		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Crosby, Caleb, , , [Electronically Filed] Date 10	05 2016		
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